

09-306 Medical Vendor Payments

Agency Description

The mission of Medical Vendor Payments is to administer the Medicaid Program to ensure operations are in accordance with federal and state statutes regarding medically necessary services to eligible recipients. Additionally, the Medical Vendor Payments Program assures that reimbursements to providers of medical services to Medicaid recipients are appropriate.

The goals of Medical Vendor Payments are:

1. To develop alternatives to institutional care.
2. To screen children for medical, vision, hearing and dental abnormalities.
3. Avoid additional Medicaid cost by utilizing Buy-In (premiums) for Medicare eligible.
4. To reduce reliance on State General Fund to cover medical expenditures.

Medical Vendor Payments Program includes the following programs: Payments to Private Providers, Payments to Public Providers, Medicare Buy-Ins and Supplements, Uncompensated Care Costs Payments, and an Auxiliary Account to identify the amount of statutory dedications in the Medical Trust Fund for the Elderly (Nursing Home intergovernmental transfers).

The Medical Vendor Payments Program uses Tobacco Settlement Funds as a means of finance. These funds are used in the Department of Health and Hospitals to partially cover the cost of providing medically necessary services to Medicaid eligible recipients. Major activities include inpatient and outpatient hospital services, ICF/MR facilities and Nursing Homes. The appropriation from the Louisiana Fund represents approximately 0.3% of the appropriation for Payments to Private Providers.

AGENCY BUDGET SUMMARY

	ACTUAL 2000-2001	ACT 12 2001-2002	EXISTING 2001-2002	CONTINUATION 2002-2003	RECOMMENDED 2002-2003	RECOMMENDED OVER/(UNDER) EXISTING
MEANS OF FINANCING:						
STATE GENERAL FUND (Direct)	\$867,916,867	\$915,736,577	\$911,018,170	\$1,123,111,942	\$915,618,965	\$4,600,795
STATE GENERAL FUND BY:						
Interagency Transfers	3,571,750	1,908,795	2,545,311	2,056,123	3,865,485	1,320,174
Fees & Self-gen. Revenues	136,023,274	5,000,000	5,000,000	5,000,000	5,000,000	0
Statutory Dedications	151,915,541	208,746,179	398,501,426	195,041,522	246,329,409	(152,172,017)
Interim Emergency Board	0	0	0	0	0	0
FEDERAL FUNDS	2,926,481,200	2,911,120,353	3,351,771,175	3,241,932,731	2,995,348,878	(356,422,297)
TOTAL MEANS OF FINANCING	\$4,085,908,632	\$4,042,511,904	\$4,668,836,082	\$4,567,142,318	\$4,166,162,737	(\$502,673,345)
EXPENDITURES & REQUEST:						
Payments to Private Providers	\$2,792,204,151	\$2,754,661,536	\$2,754,661,536	\$3,007,884,660	\$2,699,569,367	(\$55,092,169)
Payments to Public Providers	383,247,904	392,202,166	392,202,166	409,620,932	400,700,104	8,497,938
Medicare Buy-Ins & Supplements	83,553,637	90,616,338	90,616,338	94,495,821	94,495,821	3,879,483
Uncompensated Care Costs	826,902,940	805,031,864	807,175,015	866,393,070	777,649,610	(29,525,405)
Auxiliary Account	0	0	624,181,027	188,747,835	193,747,835	(430,433,192)
TOTAL EXPENDITURES AND REQUEST	\$4,085,908,632	\$4,042,511,904	\$4,668,836,082	\$4,567,142,318	\$4,166,162,737	(\$502,673,345)
AUTHORIZED FULL-TIME						
EQUIVALENTS: Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
TOTAL	0	0	0	0	0	0